Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF OHIO	-	
Case number (if known)	Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	☐ Check if this an amended filing

B 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: **Identify Yourself** About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case): Your full name Write the name that is on Kathryn your government-issued First name First name picture identification (for example, your driver's license or passport). Middle name Middle name Bring your picture Sloe identification to your Last name and Suffix (Sr., Jr., II, III) Last name and Suffix (Sr., Jr., II, III) meeting with the trustee. All other names you have used in the last 8 years Include your married or maiden names. Only the last 4 digits of your Social Security number or federal xxx-xx-8033 Individual Taxpayer Identification number (ITIN)

	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	■ I have not used any business name or EINs. Business name(s) EINs	☐ I have not used any business name or EINs. Business name(s) EINs
Where you live	1282 Lander Road	If Debtor 2 lives at a different address:
	Cleveland, OH 44124 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code
		County
	If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
	Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
Why you are choosing this district to file for bankruptcy	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)
	Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names Where you live Why you are choosing this district to file for	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names Business name(s) EINS ### I have not used any business name or EINs. ### Business name(s) ### I have not used any business name or EINs. ### Business name(s) ### EINS ### Business name or EINs. ### Bus

Deb	tor 1	Kathryn J. Sloe				Case number (if known)
Part	2:	Tell the Court About	our Bankruptcy	Case		
7. The chapter of the Bankruptcy Code you are choosing to file under					of each, see <i>Notice Required by</i> page 1 and check the appropriate	11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy e box.
	CHOO	sing to me under	Chapter 7			
			☐ Chapter 11			
			☐ Chapter 12			
			☐ Chapter 13			
8.	How	you will pay the fee	about how order. If yo a pre-print	you may pay. Typi our attorney is subn ed address.	ically, if you are paying the fee yo nitting your payment on your beha	k with the clerk's office in your local court for more details urself, you may pay with cash, cashier's check, or money alf, your attorney may pay with a credit card or check with on, sign and attach the Application for Individuals to Pay
					s (Official Form 103A).	in, sign and attach the Application for individuals to r ay
			but is not r that applie	equired to, waive y s to your family siz	our fee, and may do so only if your fee, and you are unable to pay the f	n only if you are filing for Chapter 7. By law, a judge may, ur income is less than 150% of the official poverty line ee in installments). If you choose this option, you must fill Official Form 103B) and file it with your petition.
9.			■ No.			
		ruptcy within the years?	☐ Yes.			
			Distri	ct	When	Case number
			Distri	ct	When	Case number
			Distri	ot	When	Case number
10.		ny bankruptcy	■ No			
	filed not fi you,	s pending or being by a spouse who is ling this case with or by a business er, or by an tte?	☐ Yes.			
			Debto	or		Relationship to you
			Distri	ct	When	Case number, if known
			Debto	or		Relationship to you
			Distri	ot	When	Case number, if known
11.		ou rent your	■ No. Go t	to line 12.		
	resid	ence?	☐ Yes. Has	your landlord obta	ined an eviction judgment against	you and do you want to stay in your residence?
				No. Go to line 1	12.	
				Yes. Fill out <i>Ini</i> bankruptcy peti		Judgment Against You (Form 101A) and file it with this

Deb	tor 1 Kathryn J. Sloe				Case number (if known)			
ar	Report About Any Bu	isinesses '	You Own as	a Sole Proprie	tor			
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to Pa	ırt 4.				
	business?	☐ Yes.	Name ar	nd location of bus	siness			
	A sole proprietorship is a	□ 163.						
A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.				business, if any				
	If you have more than one sole proprietorship, use a separate sheet and attach		Number,	Number, Street, City, State & ZIP Code				
	it to this petition.		Check th	ne appropriate bo	ox to describe your business:			
				lealth Care Busir	ness (as defined in 11 U.S.C. § 101(27A))			
				ingle Asset Rea	I Estate (as defined in 11 U.S.C. § 101(51B))			
				stockbroker (as d	defined in 11 U.S.C. § 101(53A))			
				Commodity Broke	er (as defined in 11 U.S.C. § 101(6))			
				lone of the above	e			
	Chapter 11 of the Bankruptcy Code and are you a small business debtor?	operation in 11 U.S	adlines. If you indicate that you are a small business debtor, you must attach your most recent balance she erations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow 1 U.S.C. 1116(1)(B). I am not filing under Chapter 11.					
	For a definition of <i>small</i> business debtor, see 11 U.S.C. § 101(51D).	■ No.	I am filin		11, but I am NOT a small business debtor according to the definition in the Bankruptcy			
	3 3 4 7	☐ Yes.	Code. I am filin	g under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.			
	•	Have Any	/ Hazardous	Property or An	y Property That Needs Immediate Attention			
4.	Do you own or have any property that poses or is	■ No.						
	alleged to pose a threat of imminent and identifiable hazard to public health or safety?	☐ Yes.	What is the	hazard?				
	Or do you own any property that needs immediate attention?			e attention is ny is it needed?				
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is th	ne property?				
	- ,				Number, Street, City, State & Zip Code			

Debtor 1 Kathryn J. Sloe

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filled for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

☐ Incapacity. □

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

to do so

Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

B 101 (Official Form 101)

Debtor 1 Kathryn J. Sloe			Case number	er (if known)		
Part 6: Answer These Que	estions for R	Reporting Purposes				
6. What kind of debts do you have?	, , , , , , , , , , , , , , , , , , ,					
		☐ No. Go to line 16b.				
		Yes. Go to line 17.				
	16b.	Are your debts primarily business debts? <i>Business debts</i> are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.				
		☐ No. Go to line 16c.				
		☐ Yes. Go to line 17.				
	16c.	State the type of debts you o	owe that are not consumer debts or busine	ss debts		
7. Are you filing under Chapter 7?	□ No.	I am not filing under Chapter	7. Go to line 18.			
Do you estimate that after any exempt property is excluded an		expenses are paid that funds	Do you estimate that after any exempt props will be available to distribute to unsecure			
administrative expense are paid that funds will be available for distribution to unsecur- creditors?		■ No □ Yes				
8. How many Creditors do you estimate that you owe?	□ 1-49 □ 50-99 □ 100-9	199	☐ 1,000-5,000 ☐ 5001-10,000 ☐ 10,001-25,000	☐ 25,001-50,000 ☐ 50,001-100,000 ☐ More than100,000		
How much do you estimate your assets to be worth?	☐ \$50,0 ☐ \$100	\$50,000 001 - \$100,000 ,001 - \$500,000 ,001 - \$1 million	☐ \$1,000,001 - \$10 million ☐ \$10,000,001 - \$50 million ☐ \$50,000,001 - \$100 million ☐ \$100,000,001 - \$500 million	☐ \$500,000,001 - \$1 billion ☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion		
How much do you estimate your liabilities to be?	■ \$50, □ \$100	\$50,000 001 - \$100,000 ,001 - \$500,000 ,001 - \$1 million	☐ \$1,000,001 - \$10 million ☐ \$10,000,001 - \$50 million ☐ \$50,000,001 - \$100 million ☐ \$100,000,001 - \$500 million	□ \$500,000,001 - \$1 billion □ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion □ More than \$50 billion		
art 7: Sign Below						
or you	I have e	I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.				
		f I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, Jnited States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.				
			rney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this it, I have obtained and read the notice required by 11 U.S.C. § 342(b).			
	I reques	t relief in accordance with the o	chapter of title 11, United States Code, spe	ecified in this petition.		
	bankrup 1519, ar	tcy case can result in fines up t	, concealing property, or obtaining money to \$250,000, or imprisonment for up to 20			
	Kathry	n J. Sloe re of Debtor 1	Signature of Debto	or 2		
	Execute	d on February 17, 2016 MM / DD / YYYY	Executed on MM	1 / DD / YYYY		

Debtor 1 Kathryn J. Sloe Case number (if known)	

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Heather L. Moseman	Date	February 17, 2016
Signature of Attorney for Debtor		MM / DD / YYYY
Heather L. Moseman		
Printed name		
Moseman Law Office, LLC		
Firm name		
8518 Mentor Avenue, Suite F		
Mentor, OH 44060		
Number, Street, City, State & ZIP Code		
Contact phone 440-255-0832	Email address	heather@mosemanlaw.com
0076457		
Bar number & State		

Fill	in this inform	ation to identify your	case:			
	otor 1	Kathryn J. Sloe				
Date		First Name	Middle Name	Last Name		
	otor 2 use if, filing)	First Name	Middle Name	Last Name		
Uni	ted States Ban	kruptcy Court for the:	NORTHERN DISTRICT	OF OHIO		
Cas	se number					
(if kn	own)				_	ck if this is an
					amer	nded filing
Oŧ.	ficial For	m 106Cum				
		m 106Sum	and Liabilities an	nd Certain Statistical Information	n	12/15
				e are filing together, both are equally responsib		
info	rmation. Fill o	ut all of your schedul	es first; then complete the	ne information on this form. If you are filing am		
you			new Summary and chec	k the box at the top of this page.		
Par	t 1: Summa	rize Your Assets				
						assets
					value	of what you own
1.	Schedule A/I 1a. Copy line	B: Property (Official F 55, Total real estate, t	orm 106A/B) rom Schedule A/B		\$	0.00
	1b. Copy line	62, Total personal pro	perty, from Schedule A/B.		\$	9,766.22
	1c. Copy line	63, Total of all propert	y on Schedule A/B		\$	9,766.22
Par	t 2: Summa	rize Your Liabilities				
					Your	iabilities
						nt you owe
2.			laims Secured by Property	(Official Form 106D) the bottom of the last page of Part 1 of Schedule L	D \$	11,512.00
3.		•	Unsecured Claims (Officia			
J.				ns) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the	total claims from Part	2 (nonpriority unsecured of	claims) from line 6j of Schedule E/F	\$	58,060.19
				Vous total linkiliti		60 570 40
				Your total liabiliti	es \$	69,572.19
Par	t 3: Summa	rize Your Income and	l Expenses			
_	•	our Income (Official Fo	•			
4.				ə I	\$	0.00
5.	Schedule J: \	Your Expenses (Offician on the contract of the	I Form 106J) ine 22c of Schedule J		\$	2,307.00
Par	t 4: Answer	These Questions for	Administrative and Stati	stical Records		
6.	Are you filing	n for hankruntey und	er Chapters 7, 11, or 13?			
0.	•		• • •	theck this box and submit this form to the court with	າ your other s	schedules.
	Yes					
7.	What kind of	debt do you have?				
				debts are those "incurred by an individual primarily of for statistical purposes. 28 U.S.C. § 159.	for a persona	al, family, or

Official Form 106Sum Summary of Your Assets and Liabilities and Certain Statistical Information

page 1 of 2

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the court with your other schedules.

Best Case Bankruptcy

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

1,226.48

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total	claim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	35,255.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$_	0.00
9g. Total. Add lines 9a through 9f.	\$	35,255.00

	ormation to identify your case	- and and ming.		
Debtor 1	Kathryn J. Sloe First Name	Middle Name Last Name		
Debtor 2	First Name	M. Alla Maria		
(Spouse, if filing)	First Name	Middle Name Last Name		
United States I	Bankruptcy Court for the: NO	RTHERN DISTRICT OF OHIO		
Case number				☐ Check if this is an
				amended filing
O#:-:-1 □	'a maa 100 A /D			
_	orm 106A/B			
	ile A/B: Proper			12/15
it fits best. Be as	s complete and accurate as possil	 List an asset only once. If an asset fits in more than one ole. If two married people are filing together, both are equal his form. On the top of any additional pages, write your nar 	ly responsible for supplying	correct information. If
Part 1: Describ	oe Each Residence, Building, Land	d, or Other Real Estate You Own or Have an Interest In		
1. Do you own o	r have any legal or equitable inter	est in any residence, building, land, or similar property?		
■ No. Go to F	Part 2			
_	e is the property?			
	,			
Part 2: Describ	pe Your Vehicles			
Yes 3.1 Make:	Audi	Who has an interest in the property? Check one.	Do not deduct secured cl	
Model:	A4	■ Debtor 1 only	the amount of any secure Creditors Who Have Clair	
Year:	2007	Debtor 2 only	Current value of the	Current value of the
Approxim Other info	nate mileage: 106000 ormation:	☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another	entire property?	portion you own?
Fair Co	ondition	☐ Check if this is community property (see instructions)	\$6,578.00	\$6,578.00
Examples: B		and other recreational vehicles, other vehicles, and watercraft, fishing vessels, snowmobiles, motorcycle a		
■ No □ Yes				
— 103				
		own for all of your entries from Part 2, including an te that number here		\$6,578.00
Part 3: Describ	pe Your Personal and Household	Items		
Do you own o	r have any legal or equitable	interest in any of the following items?		Current value of the portion you own? Do not deduct secured claims or exemptions.
	goods and furnishings Major appliances, furniture, line	ns, china, kitchenware		

Official Form 106A/B

Schedule A/B: Property

page 1

Best Case Bankruptcy

Debtor 1	Kathryn J. S	Bloe	Case number (if known	n)
■ Yes.	Describe	Appliances and Furniture		\$1,500.00
■ No	les: Televisions	and radios; audio, video, stereo, and digital equipment; comp l phones, cameras, media players, games	outers, printers, scanners; musi	c collections; electronic devices
Exampl ■ No		d figurines; paintings, prints, or other artwork; books, pictures ions, memorabilia, collectibles	s, or other art objects; stamp, o	oin, or baseball card collections;
Exampl	musical inst	ographic, exercise, and other hobby equipment; bicycles, poo	ol tables, golf clubs, skis; cano	es and kayaks; carpentry tools;
■ Yes.	Describe	Books, CDs		\$200.00
11. Clothe Examp □ No ■ Yes.	ples: Everyday o	Wearing Apparel welry, costume jewelry, engagement rings, wedding rings, h		\$0.00
□ No ■ Yes.	Describe	Jewelry		\$100.00
Exam _l	arm animals ples: Dogs, cats Describe	birds, horses 2 Dogs		\$100.00
■ No	ther personal a	nd household items you did not already list, including an	ny health aids you did not list	
		of all of your entries from Part 3, including any entries for number here		\$1,900.00
	escribe Your Finar			
Do you ov	wn or have any	egal or equitable interest in any of the following?		Current value of the portion you own? Do not deduct secured

Official Form 106A/B

Schedule A/B: Property

claims or exemptions.

page 2

De	ebtor 1	Kathryn J. Sl	oe		Case number (if known)	
16.	Cash Examµ □ No	oles: Money you h	nave in yo	ur wallet, in your	home, in a safe deposit box, and on hand when you file your petition	
	■ Yes				Cash	\$5.00
17.	Examp				ccounts; certificates of deposit; shares in credit unions, brokerage houses, and other nts with the same institution, list each.	er similar
	□ No ■ Yes				Institution name:	
	_ 100		17.1.	Checking	Citizens Bank Checking Account Acct. No. Ending 7602	\$273.22
			17.2.	Checking	Citizens Commercial Checking Account Acct. No. Ending 3464	\$10.00
18.		s, mutual funds, o oles: Bond funds,			brokerage firms, money market accounts	
	☐ Yes		I	nstitution or issue	er name:	
19.	and jo	ublicly traded sto pint venture	ock and i	nterests in incor	rporated and unincorporated businesses, including an interest in an LLC, par	rtnership,
	■ No □ Yes.	Give specific info		about them ne of entity:		
20.	Negoti	iable instruments	include pe	ersonal checks, c	egotiable and non-negotiable instruments cashiers' checks, promissory notes, and money orders. transfer to someone by signing or delivering them.	
	■ No □ Yes.	Give specific info		bout them er name:		
21.		ment or pension ples: Interests in I), 403(b), thrift savings accounts, or other pension or profit-sharing plans	
	☐ Yes.	List each accoun	•	ely. f account:	Institution name:	
22.	Your s		d deposits	you have made	so that you may continue service or use from a company nt, public utilities (electric, gas, water), telecommunications companies, or others	
					Institution name or individual:	
			Renta	l deposit	Trymac LLC 2470 Snowberry Pepper Pike, Ohio 44124	\$1,000.00
23.	_	ties (A contract fo	r a period	ic payment of mo	oney to you, either for life or for a number of years)	
	■ No □ Yes	lss	suer name	and description.		
24.		ts in an education C. §§ 530(b)(1), 5			a qualified ABLE program, or under a qualified state tuition program.	
	Yes	Ins	stitution na	ame and descripti	tion. Separately file the records of any interests.11 U.S.C. § 521(c):	

Official Form 106A/B Schedule A/B: Property page 3

D	eptor 1	Kathryn J. Sloe			Case number (if known)		
25.	Trusts,	equitable or future	interests in property (other than anyth	ning listed in line 1), and rights or powers exercis	sable for your benefit	
	☐ Yes.	Give specific inform	ation about them				
26.	Examp ■ No	oles: Internet domain	marks, trade secrets, and other intelle names, websites, proceeds from royaltie		eements		
	☐ Yes.	Give specific inform	ation about them				
	Examp ■ No	oles: Building permits	other general intangibles s, exclusive licenses, cooperative associa	tion holdings, liquor	licenses, professional licenses		
	⊔ Yes.	Give specific inform	ation about them				
M	oney or	property owed to yo	ou?			Current value of the portion you own? Do not deduct secured claims or exemptions.	
28.	Tax ref	unds owed to you					
	■ No	Cive an asitis into ma					
	⊔ Yes.	Give specific informa	ation about them, including whether you a	already filed the retu	rns and the tax years		
29.		support oles: Past due or lum	p sum alimony, spousal support, child su	pport, maintenance	, divorce settlement, property set	itlement	
	_	Give specific informa	ation				
	■ No		disability insurance payments, disability be loans you made to someone else ation	enetits, sick pay, va	cation pay, workers' compensa	tion, Social Security	
31.	Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance □ No						
	Yes.	Name the insurance	company of each policy and list its value Company name:		eficiary:	Surrender or refund	
			Lincoln Insurance group		•	value:	
			Term Life Insurance Policy endir No Cash Value		ssa K. Spall- ighter	\$0.00	
	If you a someo		nat is due you from someone who has fa living trust, expect proceeds from a life ation		or are currently entitled to receive	property because	
33.	_Examp		es, whether or not you have filed a law loyment disputes, insurance claims, or rig		nand for payment		
	■ No □ Yes.	Describe each claim	1				
34			quidated claims of every nature, inclu	ding counterclaims	s of the debtor and rights to se	t off claims	
о ¬.	■ No	Jonanyont and anni	quidated oldinio of every flatare, filelat	anny counterclaims	. c. alo acotor ana rigino to se	. c diamio	
	☐ Yes.	Describe each claim	າ				
35.	Any fin	ancial assets you d	lid not already list				

page 4

Best Case Bankruptcy

Schedule A/B: Property

Official Form 106A/B

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Debtor 1	Kathryn J. Sloe	Case number (if known)	
☐ Yes.	. Give specific information		
	the dollar value of all of your entries from Part 4, incluent 4. Write that number here		\$1,288.22
Part 5: De	escribe Any Business-Related Property You Own or Have an In	nterest In. List any real estate in Part 1.	
	own or have any legal or equitable interest in any business-rel o to Part 6.	lated property?	
Yes.	Go to line 38.		
			Current value of the portion you own? Do not deduct secured claims or exemptions.
38. Acco u	unts receivable or commissions you already earned		
■ No □ Yes.	. Describe		
Exam ■ No	equipment, furnishings, and supplies uples: Business-related computers, software, modems, pri Describe	nters, copiers, fax machines, rugs, telephones, desk	s, chairs, electronic devices
■ No	inery, fixtures, equipment, supplies you use in busine. Describe	ss, and tools of your trade	
41. Invent ■ No □ Yes.	tory Describe		
42. Intere s	sts in partnerships or joint ventures		
■ Yes.	. Give specific information about them	% of ownership:	
	My Zen Garden 100% Shareh	nolder 100% %	\$0.00
43. Custo ■ No.	mer lists, mailing lists, or other compilations		
□ Do yo	our lists include personally identifiable information (as defined i	n 11 U.S.C. § 101(41A))?	
	■ No □ Yes. Describe		
■ No	usiness-related property you did not already list . Give specific information		
	the dollar value of all of your entries from Part 5, incluent 5. Write that number here		\$0.00

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page 5 Best Case Bankruptcy

Schedule A/B: Property

Debtor 1	Kathryn J. Sloe		Case number (if known)	
	escribe Any Farm- and Commercial Fishing-Related Property You you own or have an interest in farmland, list it in Part 1.	Own or Have an Interest	t In.	
46. Do yo	u own or have any legal or equitable interest in any farm	n- or commercial fishi	ng-related property?	
■ No.	. Go to Part 7.			
Пур	s. Go to line 47.			
				Current value of the portion you own? Do not deduct secured claims or exemptions.
53. Do yo	u have other property of any kind you did not already lis			
☐ Yes.	. Give specific information			
	the dollar value of all of your entries from Part 7. Write t	hat number here	_	\$0.00
55. Part	1: Total real estate, line 2			\$0.00
	2: Total vehicles, line 5	\$6,578.00		Ψ0.00
	3: Total personal and household items, line 15	\$1,900.00		
58. Part	4: Total financial assets, line 36	\$1,288.22		
59. Part	5: Total business-related property, line 45	\$0.00		
60. Part	6: Total farm- and fishing-related property, line 52	\$0.00		
61. Part	7: Total other property not listed, line 54	+ \$0.00		
62. Total	I personal property. Add lines 56 through 61	\$9,766.22	Copy personal property tota	\$9,766.22
63. Tota	I of all property on Schedule A/B. Add line 55 + line 62			\$9,766.22

Official Form 106A/B Schedule A/B: Property

page 6

Fill in this inforn	nation to identify your	case:		
Debtor 1	Kathryn J. Sloe			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		NORTHERN DISTRICT	OF OHIO	
Case number				☐ Check if this is an amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

1	Which set of exemptions	are you claiming?	Check one only	even if your snot	ise is filina with vou

- You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
- ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
2007 Audi A4 106000 miles Fair Condition	\$6,578.00		\$0.00	Ohio Rev. Code Ann. § 2329.66(A)(2)
Line from Schedule A/B: 3.1			100% of fair market value, up to any applicable statutory limit	
Appliances and Furniture	\$1,500.00		\$1,500.00	Ohio Rev. Code Ann. § 2329.66(A)(4)(a)
Ellie Holli Goriodale 772. GT			100% of fair market value, up to any applicable statutory limit	2020100(1.9/(1.9/(2.9/
Wearing Apparel Line from Schedule A/B: 11.1	\$0.00		\$300.00	Ohio Rev. Code Ann. § 2329.66(A)(4)(a)
Elle lioni concade 772.			100% of fair market value, up to any applicable statutory limit	Ohio Rev. Code Ann. § 2329.66(A)(4)(a) Ohio Rev. Code Ann. § 2329.66(A)(4)(b)
Jewelry Line from Schedule A/B: 12.1	\$100.00		\$100.00	<u> </u>
Ellie II olii ooliodale 702. 1211			100% of fair market value, up to any applicable statutory limit	2023.00(A)(4)(3)
Cash Line from Schedule A/B: 16.1	\$5.00		\$5.00	Ohio Rev. Code Ann. § 2329.66(A)(3)
LINE HOLL GOLIEGALE AV.D. 10.1			100% of fair market value, up to any applicable statutory limit	2020.00(17)(0)

Official Form 106C

Schedule C: The Property You Claim as Exempt

page 1 of 2

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Best Case Bankruptcy

Debtor 1 Kathryn J. Sloe			Case number (if known)					
Brief description of the property Schedule A/B that lists this prop			ount of the exemption you claim	Specific laws that allow exemption				
	Copy the value fro Schedule A/B	om <i>Che</i>	ck only one box for each exemption.					
Checking: Citizens Bank Account	Checking \$273	.22	\$273.22	Ohio Rev. Code Ann. § 2329.66(A)(3)				
Acct. No. Ending 7602 Line from Schedule A/B: 17.1	I		100% of fair market value, up to any applicable statutory limit	2020.00((1)(0)				
	cking: Citizens Commercial \$10.00		\$10.00	Ohio Rev. Code Ann. §				
Checking Account Acct. No. Ending 3464 Line from Schedule A/B: 17.2	2		100% of fair market value, up to any applicable statutory limit	2329.66(A)(3)				
Rental deposit: Trymac L 2470 Snowberry	_LC \$1,000	.00	\$1,000.00	Ohio Rev. Code Ann. § 2329.66(A)(18)				
Pepper Pike, Ohio 44124 Line from Schedule A/B: 22.1			100% of fair market value, up to any applicable statutory limit	2020.00(A)(10)				
	Are you claiming a homestead exemption of more than \$155,675? (Subject to adjustment on 4/01/16 and every 3 years after that for cases filed on or after the date of adjustment.) No							
☐ Yes. Did you acquire the☐ No	e property covered by the exempt	ion within 1	,215 days before you filed this case	?				

Official Form 106C

☐ Yes

Schedule C: The Property You Claim as Exempt

Fill in this informati	ion to identify yοι	ır case:			
Debtor 1	Kathryn J. Sloe				
	First Name	Middle Name Last Name			
Debtor 2 (Spouse if, filing)	First Name	Middle Name Last Name			
· · · · · · · · · · · · · · · · · · ·					
United States Bankru	uptcy Court for the:	NORTHERN DISTRICT OF OHIO			
Case number				Charles	. If the in the
(II KIOWII)				_	c if this is an ded filing
Official Form 1	06D				
		Who Hove Claims Secure	d by Dranart	.,	40/45
Schedule D	Creditors	Who Have Claims Secure	a by Propert	у	12/15
		two married people are filing together, both are eq number the entries, and attach it to this form. On t			
known).					
1. Do any creditors have	-		Maria harra a a di Sana a la a	to many out on this famous	
_		his form to the court with your other schedules.	You have nothing else	to report on this form.	
	of the information	below.			
	ecured Claims		. Column A	Column B	Column C
		more than one secured claim, list the creditor separately for particular claim, list the other creditors in Part 2. As much	for	Value of collateral	Unsecured
		er according to the creditor's name.	Do not deduct the value of collateral.	that supports this claim	portion If any
2.1 Bk Of Amer		Describe the property that secures the claim:	\$11,512.00	\$6,578.00	\$4,934.00
Creditor's Name		2007 Audi A4 106000 miles Fair Condition			
Po Box 4514	4	As of the date you file, the claim is: Check all that			
Jacksonville		apply. Contingent			
Number, Street, City		☐ Unliquidated			
		☐ Disputed			
Who owes the debt?	Check one.	Nature of lien. Check all that apply.			
Debtor 1 only		An agreement you made (such as mortgage or se	cured		
Debtor 2 only		car loan)			
Debtor 1 and Debtor	,	☐ Statutory lien (such as tax lien, mechanic's lien)			
☐ At least one of the de		Judgment lien from a lawsuit			
☐ Check if this claim community debt	relates to a	Other (including a right to offset)			
	Opened				
	8/01/13				
	Last Active	F742			
Date debt was incurred	11/16/15	Last 4 digits of account number 5713			
	=	olumn A on this page. Write that number here:	\$11,51	2.00	
If this is the last page Write that number he		he dollar value totals from all pages.	\$11,51	2.00	
		51.71.77			
<u> </u>		r a Debt That You Already Listed			
to collect from you for	a debt you owe to so debts that you listed	notified about your bankruptcy for a debt that you omeone else, list the creditor in Part 1, and then list in Part 1, list the additional creditors here. If you d	t the collection agency he	re. Similarly, if you have	more than one
Name Addre					
-NONE-		On which li	ne in Part 1 did you	enter the creditor	?
		l act 4 digite	s of account numbe	\r	

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

page 1 of 1

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Best Case Bankruptcy

4.1	Animal Hospital Inc. Priority Creditor's Name 2735 SOM Center Road Willoughby, OH 44094 Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes Barclays Bank Delaware Priority Creditor's Name	When was the debt incurred? As of the date you file, the claim Contingent Unliquidated Disputed Type of NONPRIORITY unsecure Student loans	d claim: aration agreement or divorce that you did	\$\$	3,100.00
4.1	Priority Creditor's Name 2735 SOM Center Road Willoughby, OH 44094 Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset?	When was the debt incurred? As of the date you file, the claim Contingent Unliquidated Disputed Type of NONPRIORITY unsecure Student loans Obligations arising out of a sepanot report as priority claims Debts to pension or profit-sharing	d claim: aration agreement or divorce that you did	\$	
4.1	Priority Creditor's Name 2735 SOM Center Road Willoughby, OH 44094 Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset?	When was the debt incurred? As of the date you file, the claim Contingent Unliquidated Disputed Type of NONPRIORITY unsecure Student loans Obligations arising out of a sepanot report as priority claims Debts to pension or profit-sharing	d claim: aration agreement or divorce that you did	\$	
4.1	Priority Creditor's Name 2735 SOM Center Road Willoughby, OH 44094 Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset?	When was the debt incurred? As of the date you file, the claim Contingent Unliquidated Disputed Type of NONPRIORITY unsecure Student loans Obligations arising out of a sepanot report as priority claims	d claim:	\$	
4.1	Priority Creditor's Name 2735 SOM Center Road Willoughby, OH 44094 Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community	When was the debt incurred? As of the date you file, the claim Contingent Unliquidated Disputed Type of NONPRIORITY unsecure	is: Check all that apply	\$	
4.1	Priority Creditor's Name 2735 SOM Center Road Willoughby, OH 44094 Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and another	When was the debt incurred? As of the date you file, the claim Contingent Unliquidated Disputed Type of NONPRIORITY unsecure	is: Check all that apply	\$	
4.1	Priority Creditor's Name 2735 SOM Center Road Willoughby, OH 44094 Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	When was the debt incurred? As of the date you file, the claim Contingent Unliquidated Disputed	is: Check all that apply	\$	
4.1	Priority Creditor's Name 2735 SOM Center Road Willoughby, OH 44094 Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only	When was the debt incurred? As of the date you file, the claim Contingent Unliquidated		\$	
4.1	Priority Creditor's Name 2735 SOM Center Road Willoughby, OH 44094 Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only	When was the debt incurred? As of the date you file, the claim Contingent		\$	
4.1	Priority Creditor's Name 2735 SOM Center Road Willoughby, OH 44094 Number Street City State Zlp Code	When was the debt incurred? As of the date you file, the claim		\$	
4.1	Priority Creditor's Name 2735 SOM Center Road Willoughby, OH 44094	When was the debt incurred?		\$	
4.1	Priority Creditor's Name 2735 SOM Center Road	_	4234	\$	
4.1	-	Last 4 digits of account number	4234	\$	
4.1	Austral III austral III a	Last 4 digits of account number	400.4		
	than one creditor holds a particular claim, list th Part 2.	e other creditors in Part 3.lf you have more	than three nonpriority unsecured claims f	fill out the Continua	, and the second
4.	Yes. List all of your nonpriority unsecured claims unsecured claim, list the creditor separately for	each claim. For each claim listed, identify	what type of claim it is. Do not list claims a	already included in	Part 1. If more
	No. You have nothing to report in this part.	Submit this form to the court with your othe	r schedules.		
3.	Do any creditors have nonpriority unsecured	d claims against you?			
Part 2	Yes. List All of Your NONPRIORITY Uns	secured Claims			
	No. Go to Part 2.				
1.	Do any creditors have priority unsecured cla	nims against you?			
Part '	List All of Your PRIORITY Unsecur	ed Claims			
Schedu D: Cred the Co	ecutory contracts or unexpired leases that coule G: Executory Contracts and Unexpired Leaditors Who Have Claims Secured by Property. It inuation Page to this page. If you have no in r (if known).	ases (Official Form 106G). Do not includ If more space is needed, copy the Part	e any creditors with partially secured c you need, fill it out, number the entries	laims that are liste in the boxes on the	ed in Schedule ne left. Attach
Be as o	edule E/F: Creditors Wh	for creditors with PRIORITY claims and	Part 2 for creditors with NONPRIORIT		
	cial Form 106E/F				
(if know	vn)			☐ Check if the amended to	
Case	number				
	d States Bankruptcy Court for the: NOF	RTHERN DISTRICT OF OHIO			
` .	or 2 e if, filing) First Name	Middle Name Last Name			
` .	First Name	Middle Name Last Name			
(Spous					

Schedule E/F: Creditors Who Have Unsecured Claims

Page 1 of 7

Debtor	1 Kathryn J. Sloe		Case number (if know)				
	Who incurred the debt? Check one.	☐ Contingent					
	Debtor 1 only	— g					
	Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	l claim:				
	☐ Check if this claim is for a community debt	☐ Student loans					
	Is the claim subject to offset?	Obligations arising out of a sepa not report as priority claims	ration agreement or divorce that you did				
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts				
	Yes	Other. Specify Credit	Card				
4.3	Bby/cbna	Last 4 digits of account number	0767	\$	5,069.00		
	Priority Creditor's Name		One and 40/04/42 Leat				
	50 Northwest Point Road Elk Grove Village, IL 60007	When was the debt incurred?	Opened 10/01/13 Last Active 12/09/15				
	Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply				
	Who incurred the debt? Check one.	☐ Contingent					
	Debtor 1 only	Ü					
	☐ Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	l claim:				
	☐ Check if this claim is for a community debt	☐ Student loans					
	Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims					
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts				
	Yes	Other. Specify Charg	e Account				
		— Outer: opeony					
4.4	Bk Of Amer	Last 4 digits of account number	9659	\$	1,703.00		
	Priority Creditor's Name		0				
	Po Box 982238	When was the debt incurred?	Opened 9/01/96 Last Active 12/04/15				
	El Paso, TX 79998 Number Street City State Zlp Code	As of the date you file, the claim i					
		_	S. Oncok all that apply				
	Who incurred the debt? Check one. Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	_	_					
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured	l claim:				
	☐ At least one of the debtors and another☐ Check if this claim is for a community	Student loans					
	debt	- Student IDans					
	Is the claim subject to offset?	Obligations arising out of a sepa not report as priority claims	ration agreement or divorce that you did				
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts				
	Yes	■ Other. Specify Credit	Card				
4.5	Citizens Bank	Last 4 digits of account number	1168	\$	3,497.00		

Priority Creditor's Name

Official Form 106 E/F

Schedule E/F: Creditors Who Have Unsecured Claims

Debto	or 1 Kathryn J. Sloe			Case number (if know)		
	1000 Lafayette Blvd Bridgeport, CT 06604	When was the debt incurred	i?	Opened 1/01/14 Last Active 12/04/15		
	Number Street City State Zlp Code	As of the date you file, the	laim i	s: Check all that apply		
	Who incurred the debt? Check one.	☐ Contingent				
	Debtor 1 only					
	☐ Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only					
	☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY uns				
	Check if this claim is for a community					
	debt Is the claim subject to offset?	Obligations arising out of not report as priority claims	a sepa	ration agreement or divorce that you did		
	■ No □ Debts to pension or profit-sharing plans, and other similar debts					
	Yes					
6	Comenity Bank/limited	Land Admits of account more		8352	Φ.	810.00
	Priority Creditor's Name	Last 4 digits of account nur	nber	0332	\$	010.00
	Po Box 182789 Columbus, OH 43218	When was the debt incurred	i?	Opened 5/01/95 Last Active 12/09/15		
	Number Street City State Zlp Code	As of the date you file, the	laim i	s: Check all that apply		
	Who incurred the debt? Check one.	☐ Contingent				
	Debtor 1 only					
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY uns	ecured	d claim:		
	☐ Check if this claim is for a community debt	☐ Student loans				
	Is the claim subject to offset?	☐ Obligations arising out of not report as priority claims	a sepa	ration agreement or divorce that you did		
	■ No	☐ Debts to pension or profit-	sharin	g plans, and other similar debts		
	Yes	Other. Specify	harg	e Account		
7	Drs Alperin & Fried	Last 4 digits of account nur	nber	0059	\$	643.00
	Priority Creditor's Name	Ū			*	
	5825 Landerbrook Drive #125	When was the debt incurred	1?			
	Cleveland, OH 44124 Number Street City State Zlp Code	As of the date you file, the	laim i	s: Check all that apply		
	Who incurred the debt? Check one.	☐ Contingent				
	Debtor 1 only	· · J -····				
	☐ Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY uns	ecured	d claim:		

■ No
□ Yes

Official Form 106 E/F

debt

Schedule E/F: Creditors Who Have Unsecured Claims

☐ Student loans

Other. Specify

not report as priority claims

Page 3 of 7

 $\hfill\square$ Check if this claim is for a community

Is the claim subject to offset?

 $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did

☐ Debts to pension or profit-sharing plans, and other similar debts

Medical

Debtor	1 Kathryn J. Sloe	Case number (if know)						
4.8	Lake Health	Last 4 digits of account number	8048	\$	48.49			
	Priority Creditor's Name P.O. Box 715019	When was the debt incurred?		·				
	Columbus, OH 43271-5019 Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply					
	Who incurred the debt? Check one.	☐ Contingent						
	■ Debtor 1 only							
	☐ Debtor 2 only	☐ Unliquidated						
	☐ Debtor 1 and Debtor 2 only	☐ Disputed						
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:					
	☐ Check if this claim is for a community debt							
	Is the claim subject to offset?	☐ Obligations arising out of a sepa not report as priority claims	ration agreement or divorce that you did					
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts					
	Yes	Other. Specify Medic	al					
4.9	Lake Health	Last 4 digits of account number	3440	\$	65.30			
	Priority Creditor's Name P.O. Box 715019	When was the debt incurred?		Ψ				
	Columbus, OH 43271-5019 Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply					
			,					
	Who incurred the debt? Check one.	☐ Contingent						
	Debtor 1 only	_						
	☐ Debtor 2 only	☐ Unliquidated						
	☐ Debtor 1 and Debtor 2 only	☐ Disputed						
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:					
	☐ Check if this claim is for a community debt	☐ Student loans						
	Is the claim subject to offset?	☐ Obligations arising out of a sepa not report as priority claims						
	No	Debts to pension or profit-sharin	g plans, and other similar debts					
	Yes	Other. Specify Medic	al					
4.10	Minuteclinic Diagnostic of Ohio	Last 4 digits of account number	1633	\$	119.00			
	Priority Creditor's Name	When was the debt incurred?		Ψ				
	PO Box 329 Woonsocket, RI 02895-0781							
	Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply					
	Who incurred the debt? Check one.	☐ Contingent						
	Debtor 1 only	_						
	☐ Debtor 2 only	☐ Unliquidated						
	☐ Debtor 1 and Debtor 2 only	☐ Disputed						
	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:					
	☐ Check if this claim is for a community debt	☐ Student loans						
	Is the claim subject to offset?	☐ Obligations arising out of a sepa not report as priority claims	ration agreement or divorce that you did					
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts					
	Yes	■ Other. Specify Medic	al					

Schedule E/F: Creditors Who Have Unsecured Claims

Page 4 of 7

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1 Kathryn J. Sloe		Case number (if know)			
Navient	Last 4 digits of account number	5918	\$	1,415.0	
Priority Creditor's Name					
Po Box 9655 Wilkes Barre, PA 18773	When was the debt incurred?	Opened 11/01/03 Last Active 8/03/15			
Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply			
Who incurred the debt? Check one.	☐ Contingent	☐ Contingent			
Debtor 1 only	Ç				
Debtor 2 only	☐ Unliquidated				
☐ Debtor 1 and Debtor 2 only	☐ Disputed	☐ Disputed Type of NONPRIORITY unsecured claim: ■ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims			
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured				
☐ Check if this claim is for a commundebt	ity Student loans				
Is the claim subject to offset?					
■ No	Debts to pension or profit-sharing	g plans, and other similar debts			
□Yes	Other. Specify				
	Educa	ational			
Navient	Last 4 digits of account number	8338	\$	6,766.0	
Priority Creditor's Name		Onemad 0/04/09 Least			
Po Box 9655 Wilkes Barre, PA 18773	When was the debt incurred?	Opened 9/01/08 Last Active 12/30/15			
Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply			
Who incurred the debt? Check one.	☐ Contingent				
■ Debtor 1 only	Ç				
☐ Debtor 2 only	☐ Unliquidated				
☐ Debtor 1 and Debtor 2 only	☐ Disputed				
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	Type of NONPRIORITY unsecured claim:			
☐ Check if this claim is for a commundebt	ity Student loans				
Is the claim subject to offset?	☐ Obligations arising out of a sepanot report as priority claims	aration agreement or divorce that you did			
■ No	☐ Debts to pension or profit-sharin	or plans, and other similar debts			

☐ Yes

Navient

Priority Creditor's Name

Wilkes Barre, PA 18773

Number Street City State Zlp Code

Po Box 9500

4.13

Schedule E/F: Creditors Who Have Unsecured Claims

☐ Other. Specify

Last 4 digits of account number

When was the debt incurred?

Educational

As of the date you file, the claim is: Check all that apply

0831

Opened 8/01/05 Last

Active 11/13/14

Page 5 of 7

Best Case Bankruptcy

27,074.00

\$

Debto	r 1 Kathryn J. Sloe		Case number (if know)		
	Who incurred the debt? Check one.	☐ Contingent			
	Debtor 1 only	·			
	☐ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
	☐ Check if this claim is for a community debt	Student loans			
	Is the claim subject to offset?	☐ Obligations arising out of a sepanot report as priority claims	aration agreement or divorce that you did		
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts		
	☐ Yes	Other. Specify			
		Educ	ational		
4.14	PayPal Credit SVCS/SYNCB	Last 4 digits of account number	0694	\$	5,223.03
	Priority Creditor's Name PO Box 960080 Orlando, FL 32896-0080	When was the debt incurred?			
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply		
	Who incurred the debt? Check one.	☐ Contingent			
	Debtor 1 only	□ Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
	☐ Check if this claim is for a community debt	☐ Student loans			
	Is the claim subject to offset?	☐ Obligations arising out of a sepa	aration agreement or divorce that you did		
	■ No	☐ Debts to pension or profit-sharing	ng plans, and other similar debts		
	Yes	Other. Specify Credi	t		
4.15	Syncb/lowes	Last 4 digits of account number	5643	\$	1,006.00
	Priority Creditor's Name	Last 4 digits of account number	3043	Φ	1,000.00
	Po Box 956005 Orlando, FL 32896	When was the debt incurred?	Opened 9/01/14 Last Active 12/22/15		
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply		
	Who incurred the debt? Check one.	☐ Contingent			
	Debtor 1 only	- Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
	☐ Check if this claim is for a community debt	☐ Student loans			
	Is the claim subject to offset?	☐ Obligations arising out of a sepanot report as priority claims			
	■ No	Debts to pension or profit-sharing			
	Yes	Other. Specify Charg	ge Account		
4.16	Syncb/mega Group Usa I	Last 4 digits of account number	3292	\$	1,435.00
	Priority Creditor's Name	Last + digits of account number		Ψ	-,
	C/o Po Box 965036 Orlando, FL 32896	When was the debt incurred?	Opened 10/01/13 Last Active 12/21/15		

Schedule E/F: Creditors Who Have Unsecured Claims

Page 6 of 7

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Best Case Bankruptcy

otor 1 Katl	hryn J. Sloe		Case	number (if know)			
Number	Street City State Zlp Code	As of the date you file, the claim is:	Check a	II that apply			
Who inc	curred the debt? Check one.	☐ Contingent					
■ Debt	tor 1 only						
☐ Debt	tor 2 only	☐ Unliquidated					
☐ Debt	tor 1 and Debtor 2 only	☐ Disputed					
☐ At le	ast one of the debtors and another	Type of NONPRIORITY unsecured c	laim:				
	ck if this claim is for a community	☐ Student loans					
debt Is the c	laim subject to offset?	☐ Obligations arising out of a separation not report as priority claims	tion agre	ement or divorce that	you did		
■ No		☐ Debts to pension or profit-sharing p	olans, an	d other similar debts			
Yes		Other. Specify Charge	Αςςοι	unt			
3: List	Others to Be Notified About a D	ebt That You Already Listed					
ing to collectore than one	ct from you for a debt you owe to son	about your bankruptcy, for a debt that yo neone else, list the original creditor in Pa I listed in Parts 1 or 2, list the additional only iis page.	rts 1 or 2	2, then list the collec	ction agency here. S	imilarly, if you have	
e Addres	SS	On which entry in Part 1 or Pa		•	•		
C 4 Bayber	ry Pood				Priority Unsecu		
	, FL 32256	•	Part :	2: Creditors with	Nonpriority Uns	ecured Claims	
	,	Last 4 digits of account numb	er 1	009			
ne Addres	SS	On which entry in Part 1 or Pa	rt2 dic	d you list the or	iginal creditor?		
nsworld §							
Prudenti sham, PA			■ Part 2: Creditors with Nonpriority Unsecured Claims				
511a111, F <i>F</i>	4 19044	Last 4 digits of account numb	er 1	633			
4: Add	the Amounts for Each Type of U	Jnsecured Claim					
	unts of certain types of unsecured cla	nims. This information is for statistical re	porting p	purposes only. 28 U	.S.C. §159. Add the a	amounts for each typ	
				Total claim			
l alaima	6a. Domestic support obligation	18	6a.	\$	0.00		
l claims n Part 1	6b. Taxes and certain other deb	ts you owe the government	6b.	\$	0.00		
	6c. Claims for death or persona	l injury while you were intoxicated	6c.	\$	0.00		
	6d. Other. Add all other priority u	nsecured claims. Write that amount here.	6d.	\$	0.00		
	6e. Total. Add lines 6a through 6	d.	6e.	\$	0.00		
				Total Claim			
	6f. Student loans		6f.	\$	35,255.00		
claims n Part 2	6g. Obligations arising out of a	separation agreement or divorce that you	ı				
uit 2	did not report as priority cla	ims	6g.	\$	0.00		
		haring plans, and other similar debts	6h.	\$	0.00		
	6i. Other. Add all other nonpriori	ty unsecured claims. Write that amount here	e. 6i.	\$	22,805.19		
	6i. Total. Add lines 6f through 6i.		6i.	\$			

Fill in this infor	Fill in this information to identify your case:							
Debtor 1	Kathryn J. Sloe							
	First Name	Middle Name	Last Name					
Debtor 2								
(Spouse if, filing)	First Name	Middle Name	Last Name					
United States Bankruptcy Court for the:		NORTHERN DISTRICT	OF OHIO					
Case number								
(if known)					Check if this is an			
					amended filing			

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - □ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code State what the contract or lease is for

2.1 Trymac, LLC 2470 Snowberry Cleveland, OH 44124 **Rental Lease**

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

Page 1 of 1

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	s information to identify your				
Debtor 1	Kathryn J. Sloe First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, fili	ng) First Name	Middle Name	Last Name		
United Sta	ates Bankruptcy Court for the:	NORTHERN DISTRICT	OF OHIO		
Case num (if known)	ber				☐ Check if this is an amended filing
Sched Codebtors	I Form 106H Iule H: Your Cod are people or entities who a	re also liable for any del			
ill it out, a	e filing together, both are equind number the entries in the earn case number (if known)	boxes on the left. Attac	h the Additional Page		ed, copy the Additional Page, any Additional Pages, write
1. Do	you have any codebtors? (If	you are filing a joint case,	do not list either spous	e as a codebtor.	
■ No □ Yes	S				
Arizon No.	hin the last 8 years, have you ha, California, Idaho, Louisiana, Go to line 3.	Nevada, New Mexico, Pu	uerto Rico, Texas, Wasl		tes and territories include
3. In Col in line Form		tors. Do not include you f that person is a guara	r spouse as a codebto	sure you have listed the ci	th you. List the person showr reditor on Schedule D (Officia edule E/F, or Schedule G to
	Column 1: Your codebtor Name, Number, Street, City, State and Zl	P Code		Column 2: The creditor Check all schedules that	r to whom you owe the debt at apply:
3.1	Name			☐ Schedule D, line ☐ Schedule E/F, line ☐ Schedule G, line ☐	
	Number Street City	State	ZIP Code	_	
3.2	Name			Schedule D, line ☐ Schedule E/F, line ☐ Schedule G, line ☐	
	Number Street City	State	ZIP Code	_	

Fill	in this information to identify your o	ase:				1				
	otor 1 Kathryn J. S									
	otor 2 ouse, if filing)				_					
Uni	ted States Bankruptcy Court for the	e: NORTHERN DISTRIC	CT OF OHIO							
O Se a sup spo	fficial Form 1061 chedule I: Your Inc as complete and accurate as pos plying correct information. If you use. If you are separated and you	sible. If two married peo are married and not fili ir spouse is not filing w	ng jointly, and your ith you, do not inclu	spouse ide infor	is li mat	Ar Ar 13 MI and Debving with ion about	M / DD/ Y tor 2), bo you, incl	ent showin eas of the for YYYY oth are equal to the control of the	mation abou ore space is	12/15 sible for t your needed,
	ch a separate sheet to this form. T 1: Describe Employment	On the top of any additi	ional pages, write yo	our nam	e an	d case nu	ımber (if	known). A	Answer every	/ questio
1.	Fill in your employment information.		Debtor 1				Debtor 2	or non-fi	ling spouse	
	If you have more than one job, attach a separate page with information about additional employers.	Employment status	☐ Employed ■ Not employed				☐ Emplo	-		
	Include part-time, seasonal, or self-employed work.	Occupation Employer's name								
	Occupation may include student or homemaker, if it applies.	Employer's address								
		How long employed t	here?							
Par	Give Details About Mo	nthly Income								
	mate monthly income as of the duse unless you are separated.	ate you file this form. If	you have nothing to r	eport for	any	line, write	\$0 in the	space. In	nclude your no	on-filing
-	u or your non-filing spouse have m e space, attach a separate sheet to		ombine the information	on for all	emp	loyers for	that perso	on on the I	lines below. If	you need
						For Deb	tor 1		btor 2 or ng spouse	
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$		0.00	\$	N/A	
3.	Estimate and list monthly over	ime pay.		3.	+\$		0.00	+\$	N/A	
4.	Calculate gross Income. Add li	ne 2 + line 3.		4	\$		0.00	\$	N/A	

					For I	Debtor 1			r Debtor n-filing s		
	Copy	/ line 4 here	4.		\$		0.00	\$	9	N/A	
5.	List a	all payroll deductions:						_			
	5a.	Tax, Medicare, and Social Security deductions	5a		\$		0.00	\$		N/A	
	5b.	Mandatory contributions for retirement plans	5b		\$		0.00	\$		N/A	
	5c.	Voluntary contributions for retirement plans	5c		\$		0.00	\$		N/A	
	5d.	Required repayments of retirement fund loans	5d		\$		0.00	\$		N/A	
	5e.	Insurance	5e		\$		0.00	\$		N/A	
	5f.	Domestic support obligations	5f.		\$		0.00	\$		N/A	
	5g.	Union dues	5g		\$		0.00	\$		N/A	
	5h.	Other deductions. Specify:	5h	.+	\$		0.00	+ \$		N/A	
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$		0.00	\$_		N/A	
7.	Calc	ulate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$		0.00	\$		N/A	
8.	List a 8a.	All other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a	ı .	\$		0.00	\$		N/A	
	8b.	Interest and dividends	8b		\$		0.00	\$		N/A	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.			\$		0.00	\$		N/A	
	8d.	Unemployment compensation	8c 8d		\$—			\$-		N/A	
	8e.	Social Security	8e		\$—		0.00	\$-		N/A N/A	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	e 8f.		\$		0.00	\$_		N/A	
	8g.	Pension or retirement income	8g		\$		0.00	\$_		N/A	
	8h.	Other monthly income. Specify:	_ 8h	.+	\$		0.00	+ \$_		N/A	
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	;	\$		0.00	\$_		N/A	
10.		ulate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$_		0.00	+ \$		N/A	= \$	0.00
11.	Include other	e all other regular contributions to the expenses that you list in <i>Schedule</i> de contributions from an unmarried partner, members of your household, your friends or relatives. of include any amounts already included in lines 2-10 or amounts that are not ify:	depe						Schedu	le J. +\$	0.00
12.		the amount in the last column of line 10 to the amount in line 11. The reset hat amount on the Summary of Schedules and Statistical Summary of Certains								\$	0.00
13.	Do ye	ou expect an increase or decrease within the year after you file this form No. Yes. Explain:	?							Combined monthly i	

Official Form 106I Schedule I: Your Income page 2

Fill	in this information to identify your case:				
Deb	otor 1 Kathryn J. Sloe		Check	if this is:	
	Taumyn or oroc		☐ Ai	n amended filing	
	otor 2ousse, if filling)				ving postpetition chapter the following date:
(Spi	ouse, ir ming)		1	b expenses as on t	the following date.
Unit	ted States Bankruptcy Court for the: NORTHERN DISTRICT OF OHIO		M	M / DD / YYYY	
Cas	se number				
(If k	known)				
0	fficial Form 106J				
S	chedule J: Your Expenses				12/15
Be	as complete and accurate as possible. If two married people are fili ormation. If more space is needed, attach another sheet to this form mber (if known). Answer every question.				
Par 1.	rt 1: Describe Your Household Is this a joint case?				
١.	•				
	■ No. Go to line 2. ☐ Yes. Does Debtor 2 live in a separate household?				
	□ No				
	☐ Yes. Debtor 2 must file Official Form 106J-2, Expenses for 3	Separate Housel	nold of Debto	or 2.	
•	•	•			
2.	Do you have dependents? ■ No				
		ependent's relatior ebtor 1 or Debtor 2		Dependent's age	Does dependent live with you?
	Do not state the				□ No
	dependents names.				Yes
					□ No
					☐ Yes
					□ No □ Yes
	_				☐ Yes
					☐ Yes
3.	Do your expenses include				□ 163
	expenses of people other than yourself and your dependents?				
	rt 2: Estimate Your Ongoing Monthly Expenses				
exp	timate your expenses as of your bankruptcy filing date unless you a penses as of a date after the bankruptcy is filed. If this is a supplementable date.	re using this for ental <i>Schedule</i> .	m as a sup J, check the	plement in a Cha box at the top o	pter 13 case to report f the form and fill in the
Inc	clude expenses paid for with non-cash government assistance if you	ı know			
the	e value of such assistance and have included it on Schedule I: Your			Your expe	neae
(Ot	fficial Form 106l.)			Tour expe	
4.	The rental or home ownership expenses for your residence. Include payments and any rent for the ground or lot.	de first mortgage	4. \$		875.00
	If not included in line 4:				
	4a. Real estate taxes		4a. \$		0.00
	4b. Property, homeowner's, or renter's insurance		4b. \$		20.00
	4c. Home maintenance, repair, and upkeep expenses		4c. \$		0.00
5	4d. Homeowner's association or condominium dues	auity loons	4d. \$ 5. \$		0.00
5.	Additional mortgage payments for your residence, such as home e	quity idalis	J. Þ		0.00

ebtor 1	Kathryn J. Sloe	Case num	ber (if known)	
. Utilitie	es:			
	Electricity, heat, natural gas	6a.	\$	110.00
	Water, sewer, garbage collection	6b.	\$	50.00
	Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	192.00
	Other. Specify:	6d.	\$	0.00
	and housekeeping supplies	7.	\$	300.00
	care and children's education costs	8.	\$	0.00
	ng, laundry, and dry cleaning	9.	\$	0.00
	nal care products and services	9. 10.	\$ 	
	•		· -	0.00
	al and dental expenses	11.	\$	100.00
	portation. Include gas, maintenance, bus or train fare. : include car payments.	12.	\$	100.00
	ainment, clubs, recreation, newspapers, magazines, and books	13.	\$	0.00
	able contributions and religious donations	14.	\$	
	_	14.	Φ	0.00
5. Insura	include insurance deducted from your pay or included in lines 4 or 20.			
	Life insurance	15a.	\$	33.00
	Health insurance	15a. 15b.	·	120.00
	Vehicle insurance	15b. 15c.	\$ 	
			·	65.00
	Other insurance. Specify:	15d.	\$	0.00
Specif	<u></u>	16.	\$	0.00
	ment or lease payments:	47-	•	242.22
	Car payments for Vehicle 1	17a.	·	342.00
	Car payments for Vehicle 2	17b.	·	0.00
	Other. Specify:	17c.	\$	0.00
	Other. Specify:	17d.	\$	0.00
	payments of alimony, maintenance, and support that you did not report a		\$	0.00
	ted from your pay on line 5, Schedule I, Your Income (Official Form 106I payments you make to support others who do not live with you.).	\$	
		19.	Ψ	0.00
Specify	<u> </u>		our Incomo	
	real property expenses not included in lines 4 or 5 of this form or on Sc Mortgages on other property	20a.		0.00
	Real estate taxes	20a. 20b.	· ·	
			·	0.00
	Property, homeowner's, or renter's insurance	20c.	\$	0.00
	Maintenance, repair, and upkeep expenses	20d.	·	0.00
	Homeowner's association or condominium dues	20e.	·	0.00
. Other:	Specify:	21.	+\$	0.00
	d lines 4 through 21.		\$	2,307.00
	opy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2)	\$	2,301.00
		_		
	dd line 22a and 22b. The result is your monthly expenses. late your monthly net income.		\$	2,307.00
	Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	0.00
	Copy your monthly expenses from line 22c above.	23b.		2,307.00
۷۵۵.	oopy your monthly expenses normalice 220 above.	۷۵۵.	Ψ	۷,307.00
	Subtract your monthly expenses from your monthly income. The result is your <i>monthly net income</i> .	23c.	\$	-2,307.00
For exa modification No.				r decrease because of a
☐ Yes	Explain here:			

Fill in this	information to identify your	case:				
Debtor 1	Kathryn J. Sloe					
	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse if, filin	g) First Name	Middle Name	Last Name			
United Stat	es Bankruptcy Court for the:	NORTHERN DISTRI	CT OF OHIO			
Case numb	er					
(if known)						Check if this is an
						amended filing
Decla If two marri You must fi obtaining m	ration About a retion About a retion About a red people are filing together this form whenever you for the poople or property by fraud in oth. 18 U.S.C. §§ 152, 1341,	r, both are equally resile bankruptcy schedunconnection with a b	sponsible for supply	ing correct information. nedules. Making a false st		
	Sign Below					
Did yo	ou pay or agree to pay some	eone who is NOT an a	ttorney to help you f	ill out bankruptcy forms?		
•	No					
	Yes. Name of person			Attach <i>Bankruptcy Pei</i> and Signature (Official I		er's Notice, Declaration,
	penalty of perjury, I declare ey are true and correct.	that I have read the s	ummary and schedu	ules filed with this declara	ation and	

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

Signature of Debtor 2

Date

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X /s/ Kathryn J. Sloe Kathryn J. Sloe

Signature of Debtor 1

Date **February 17, 2016**

Best Case Bankruptcy

	Kathryn J. Sloe								
	First Name	Middle Name	Last Name						
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name						
	Bankruptcy Court for the:	NORTHERN DISTRICT OF OH							
	Sankruptcy Court for the.	NORTHERIN BIOTRIOT OF OTH							
Case number (if known)				☐ Check if this is an					
				amended filing					
Official F									
Statemen	nt of Financial A	ffairs for Individual	s Filing for Bankruptcy	12/1					
information. If		ttach a separate sheet to this for	ng together, both are equally responsorm. On the top of any additional pag						
Part 1: Give	e Details About Your Mari	tal Status and Where You Live	d Before						
1. What is yo	our current marital status	?							
☐ Marrie	ed								
■ Not m	narried								
2. During the	Ouring the last 3 years, have you lived anywhere other than where you live now?								
z. During in	e last 3 years, have you liv	ved anywhere other than where	you live now?						
_	e last 3 years, have you liv	ved anywhere other than where	you live now?						
□ No	• . •	ved anywhere other than where ed in the last 3 years. Do not incl							
□ No ■ Yes. I	List all of the places you live	ed in the last 3 years. Do not incl	ude where you live now.	Dates Debtor 2					
□ No ■ Yes. I	List all of the places you live	ed in the last 3 years. Do not incl Dates Debtor 1 lived there		Dates Debtor 2 lived there					
□ No ■ Yes. I Debtor 1 4751 Eld	List all of the places you live	ed in the last 3 years. Do not incl Dates Debtor 1	ude where you live now.						
□ No ■ Yes. I Debtor 1 4751 Eld	List all of the places you live Prior Address:	Dates Debtor 1 lived there From-To:	ude where you live now. Debtor 2 Prior Address:	lived there ☐ Same as Debtor 1					
□ No ■ Yes. I Debtor 1 4751 Eld Willough	List all of the places you live Prior Address: do Street hby, OH 44094	Dates Debtor 1 lived there From-To: 8/2002-10/2013	ude where you live now. Debtor 2 Prior Address:	lived there ☐ Same as Debtor 1 From-To: ☐ Same as Debtor 1					
□ No ■ Yes. I Debtor 1 4751 Eld Willough	List all of the places you live Prior Address: do Street hby, OH 44094	Dates Debtor 1 lived there From-To: 8/2002-10/2013	ude where you live now. Debtor 2 Prior Address: ☐ Same as Debtor 1	lived there ☐ Same as Debtor 1 From-To:					
□ No ■ Yes. I Debtor 1 4751 Eld Willough	List all of the places you live Prior Address: do Street hby, OH 44094 dgebury Blvd hby, OH 44094	Dates Debtor 1 lived there From-To: 8/2002-10/2013 From-To: 10/2013-11/2014	Debtor 2 Prior Address: Same as Debtor 1 Same as Debtor 1	lived there ☐ Same as Debtor 1 From-To: ☐ Same as Debtor 1 From-To:					
□ No ■ Yes. I Debtor 1 4751 Eld Willough	List all of the places you live Prior Address: do Street hby, OH 44094 dgebury Blvd hby, OH 44094	Dates Debtor 1 lived there From-To: 8/2002-10/2013	ude where you live now. Debtor 2 Prior Address: ☐ Same as Debtor 1	lived there ☐ Same as Debtor 1 From-To: ☐ Same as Debtor 1					
□ No ■ Yes. I Debtor 1 4751 Eld Willough 6292 Rid Willough	List all of the places you live Prior Address: do Street hby, OH 44094 dgebury Blvd hby, OH 44094	Dates Debtor 1 lived there From-To: 8/2002-10/2013 From-To: 10/2013-11/2014 From-To:	Debtor 2 Prior Address: Same as Debtor 1 Same as Debtor 1	lived there ☐ Same as Debtor 1 From-To: ☐ Same as Debtor 1 From-To:					
□ No ■ Yes. I Debtor 1 4751 Eld Willough 6292 Ric Willough 6507 Ma #101 Clevelar	List all of the places you live Prior Address: do Street hby, OH 44094 dgebury Blvd hby, OH 44094 arsol and, OH 44124	Dates Debtor 1 lived there From-To: 8/2002-10/2013 From-To: 10/2013-11/2014 From-To: 11/2014-2/2015	Debtor 2 Prior Address: Same as Debtor 1 Same as Debtor 1	Same as Debtor 1 From-To: ☐ Same as Debtor 1 From-To: ☐ Same as Debtor 1 From-To: ☐ Same as Debtor 1 From-To:					
Debtor 1 4751 Eld Willough 6292 Ric Willough 6507 Ma #101 Clevelar	List all of the places you live Prior Address: do Street hby, OH 44094 dgebury Blvd hby, OH 44094 arsol arsol	Dates Debtor 1 lived there From-To: 8/2002-10/2013 From-To: 10/2013-11/2014 From-To:	Debtor 2 Prior Address: Same as Debtor 1 Same as Debtor 1	lived there ☐ Same as Debtor 1 From-To: ☐ Same as Debtor 1 From-To: ☐ Same as Debtor 1					
Debtor 1 4751 Eld Willough 6292 Ric Willough 6507 Ma #101 Clevelar	List all of the places you live Prior Address: do Street hby, OH 44094 dgebury Blvd hby, OH 44094 arsol and, OH 44124	Dates Debtor 1 lived there From-To: 8/2002-10/2013 From-To: 10/2013-11/2014 From-To: 11/2014-2/2015	Debtor 2 Prior Address: Same as Debtor 1 Same as Debtor 1	lived there ☐ Same as Debtor 1 From-To: ☐ Same as Debtor 1 From-To: ☐ Same as Debtor 1 From-To:					
Debtor 1 4751 Eld Willough 6292 Ric Willough 6507 Ma #101 Clevelar	List all of the places you live Prior Address: do Street hby, OH 44094 dgebury Blvd hby, OH 44094 arsol arsol	Dates Debtor 1 lived there From-To: 8/2002-10/2013 From-To: 10/2013-11/2014 From-To: 11/2014-2/2015	Debtor 2 Prior Address: Same as Debtor 1 Same as Debtor 1	lived there ☐ Same as Debtor 1 From-To: ☐ Same as Debtor 1 From-To: ☐ Same as Debtor 1 From-To:					

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 1

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Case number (if known)

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Debtor 1

Kathryn J. Sloe

accounts or refuse to make a payment because you owed a debt?

No

Yes. Fill in the details.

Creditor Name and Address Describe the action the creditor took Date action was **Amount** taken

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

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Debtor 1 Kathryn J. Sloe			Case number (if known)					
12.	Within 1 year before you filed for bankru court-appointed receiver, a custodian, o	assignee for the bend	efit of creditors, a					
	■ No							
	☐ Yes							
Par	rt 5: List Certain Gifts and Contribution	ıs						
13.	Vithin 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? ■ No							
	☐ Yes. Fill in the details for each gift.							
	Gifts with a total value of more than \$600 per person		Describe the gifts	Dates you gave the gifts	Value			
	Person to Whom You Gave the Gift and Address:							
14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600								
	NoYes. Fill in the details for each gift or of	contribut	ion.					
	Gifts or contributions to charities that more than \$600 Charity's Name		Describe what you contributed	Dates you contributed	Value			
	Address (Number, Street, City, State and ZIP Code	=)						
Part 6: List Certain Losses 15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other								
	disaster, or gambling?							
	□ No							
	Yes. Fill in the details.							
	Describe the property you lost and	Describe any insurance coverage for the loss Date of your Value of prop		Value of property				
			the amount that insurance has paid. List g insurance claims on line 33 of Schedule A/B:	loss	lost			
	Wedding Ring & Aniversary Ring- Lost between Moves	4200.0		2/2015	\$4,200.00			
Par	rt 7: List Certain Payments or Transfers	5						
16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy.								
	□ No							
	Yes. Fill in the details.							
	Person Who Was Paid		Description and value of any property	Date payment	Amount of			
	Address		transferred	or transfer was	payment			
	Email or website address Person Who Made the Payment, if Not	⁄ou		made				
	Moseman Law Office, LLC 8518 Mentor Avenue Suite F			February 2016	\$1,400.00			
	Mentor, OH 44060							

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

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5311 Wist Commercial Blvd Suite 401 Fort Lauderdale, FL 33309 www.startfreshtoday.com 17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. No Yes. Fill in the details. Person Who Was Paid Address Description and value of any property or transfer was made 18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. No Yes. Fill in the details. Person Who Received Transfer Address Person's relationship to you 19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asser-protection devices.) No Yes. Fill in the details. Name of trust Description and value of the property transferred Date Transfer was made List of Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units Uithin 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. No Yes. Fill in the details. Name of Financial Institution and Address Williamser, tips, State and Zip Last		Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You	Description and va transferred	lue of any prop	perty	Date payment or transfer was made	Amount of payment
Do not include any payment or transfer that you listed on line 16. No		5311 West Commercial Blvd Suite 401 Fort Lauderdale, FL 33309				2-6-16	\$25.00
Person Who Was Paid Address Description and value of any property transfer was made 18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include glits and transfers that you have already listed on this statement. No Yes. Fill in the details. Person Who Received Transfer Address Person's relationship to you 19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.) No Yes. Fill in the details. Name of trust Description and value of the property transferred Date Transfer was made Part 8: List of Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed sold, moved, or transferred? Include checking, savings, money market, or other financial accounts or instruments held in your name, or for your benefit, closed sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. No Yes, Fill in the details. Name of Financial Institution and Address (Number, Street, City, State and ZIP Code) Who else had access to it? Address (Number, Street, City, State and ZIP Code) Who else had access to it? Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) Poyou still have it?		promised to help you deal with your creditors Do not include any payment or transfer that you like	or to make payments t			or transfer any propo	erty to anyone who
Address transferred transferred transfer was made payme made 18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outlight transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include giths and transfers that you have already listed on this statement. No Yes, Fill in the details. Person Who Received Transfer Address Person's relationship to you 19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.) No Yes, Fill in the details. Name of trust Description and value of the property transferred Date Transfer was made Description and value of the property transferred Date Transfer was made Description and value of the property transferred Date Transfer was made Part 8: List of Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokeras houses, pension funds, cooperatives, associations, and other financial institutions. No Yes, Fill in the details. Name of Financial Institution and Address (Number, Street, City, State and ZIP Code) Who else had access to it? Describe the contents Do you still have it?		☐ Yes. Fill in the details.					
transferred in the ordinary course of your business or financial affairs? Include both outright transfers and tas a security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. No Yes. Fill in the details. Person Who Received Transfer Address Person's relationship to you Person's relationship to you Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.) No Yes. Fill in the details. Name of trust Description and value of the property transferred Date Transfer was made Part 8: List of Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed sold, moved, or transferred? No Yes. Fill in the details. Name of Financial Institution and Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) Who else had access to it? Address (Number, Street, City, State and ZIP Code) Who else had access to it? Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) No Do you still have it?			•	lue of any prop	erty	or transfer was	Amount of payment
Person Who Received Transfer Address Person's relationship to you 19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiarry? (These are often called asset-protection devices.) No Yes. Fill in the details. Name of trust Description and value of the property transferred Date Transfer wa made		transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement.					
Address		Yes. Fill in the details.					
19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.) No Yes. Fill in the details. Name of trust Description and value of the property transferred Date Transfer was made Last A digits of accounts or instruments of the property transfer was made Date Transfer was made Date Transfer was made Date Transfer was made Date Transfer was made		Address			payments	received or debts	Date transfer was made
beneficiary? (These are often called asset-protection devices.) No Yes. Fill in the details. Name of trust Description and value of the property transferred Date Transfer wa made Part 8: List of Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. No Yes. Fill in the details. Name of Financial Institution and Address (Number, Street, City, State and ZIP account number instrument closed, sold, moved, or transferred 21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities cash, or other valuables? No Yes. Fill in the details. Name of Financial Institution Address (Number, Street, City, State and ZIP Code) Who else had access to it? Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code)		Person's relationship to you					
Name of trust Description and value of the property transferred Date Transfer wa made Part 8: List of Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. No Yes. Fill in the details. Name of Financial Institution and Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Name of Financial Institution Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code)		beneficiary? (These are often called asset-protect		property to a s	self-settled tr	rust or similar device	of which you are a
Part 8: List of Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. No Yes. Fill in the details. Name of Financial Institution and Address (Number, Street, City, State and ZIP Code) Last 4 digits of account or instrument closed, sold, moved, or transferred Type of account or instrument closed, sold, moved, or transferred 21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities cash, or other valuables? No Yes. Fill in the details. Name of Financial Institution Address (Number, Street, City, State and ZIP Code) Who else had access to it? Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code)			December 1 and 1 a				Data Turnafanna
20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. No Yes. Fill in the details. Name of Financial Institution and Address (Number, Street, City, State and ZIP Code) Last 4 digits of account or instrument closed, sold, moved, or transferred 21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities cash, or other valuables? No Yes. Fill in the details. Name of Financial Institution Address (Number, Street, City, State and ZIP Code) Who else had access to it? Address (Number, Street, City, State and ZIP Code) Do you still have it?		Name of trust	Description and va	lue of the prop	erty transfer	rea	
sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. No Yes. Fill in the details. Name of Financial Institution and Address (Number, Street, City, State and ZIP Code) Last 4 digits of account or instrument closed, sold, moved, or transferred Last 4 digits of instrument closed, sold, moved, or transferred Last balance before closing to transferred Last balance closed, sold, moved, or transferred No □ you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities cash, or other valuables? No Yes. Fill in the details. Name of Financial Institution Address (Number, Street, City, State and ZIP Code) Who else had access to it? Describe the contents Do you still have it?	Par	8: List of Certain Financial Accounts, Instru	uments, Safe Deposit I	Boxes, and Sto	rage Units		
□ Yes. Fill in the details. Name of Financial Institution and Address (Number, Street, City, State and ZIP Code) Last 4 digits of account or instrument Date account was closed, sold, moved, or transferred Last balance before closing or transferred 21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities cash, or other valuables? ■ No □ Yes. Fill in the details. Name of Financial Institution Address (Number, Street, City, State and ZIP Code) Who else had access to it? Address (Number, Street, City, Describe the contents Do you still have it?		sold, moved, or transferred? Include checking, savings, money market, or o houses, pension funds, cooperatives, associa —	other financial account	ts; certificates	of deposit; s		
Address (Number, Street, City, State and ZIP		_					
cash, or other valuables? ■ No □ Yes. Fill in the details. Name of Financial Institution Address (Number, Street, City, State and ZIP Code) Who else had access to it? Address (Number, Street, City, State and ZIP Code) Describe the contents Do you still have it?		Address (Number, Street, City, State and ZIP ad	_		cle me	osed, sold, oved, or	Last balance before closing or transfer
☐ Yes. Fill in the details. Name of Financial Institution Who else had access to it? Describe the contents Do you still have it? Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, have it? Address (Number, Street, City, have it?	21.		ar before you filed for k	bankruptcy, an	y safe depos	it box or other depos	sitory for securities,
Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, have it?							
			Address (Number, Stre		Describe the	contents	•

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

22.	Hav	e you stored property in a storage unit or p	place other than your home within	1 year before you filed for bankruptcy	/
		No			
		Yes. Fill in the details.			
		me of Storage Facility dress (Number, Street, City, State and ZIP Code)	Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)	Describe the contents	Do you still have it?
Pai	rt 9:	Identify Property You Hold or Control for	·		
23.	Do	you hold or control any property that some		rty you borrowed from, are storing fo	or, or hold in trust
	for	someone.			
		No Yes. Fill in the details.			
	_	rner's Name dress (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Describe the property	Value
Pa	rt 10:	Give Details About Environmental Inform	nation		
For	the p	ourpose of Part 10, the following definitions	s apply:		
	toxi	rironmental law means any federal, state, or c substances, wastes, or material into the a ulations controlling the cleanup of these su	air, land, soil, surface water, groun		
		means any location, facility, or property as wn, operate, or utilize it, including disposa	•	law, whether you now own, operate,	or utilize it or used
		ardous material means anything an enviror ardous material, pollutant, contaminant, or		s waste, hazardous substance, toxic	substance,
Rep	ort a	II notices, releases, and proceedings that y	ou know about, regardless of whe	n they occurred.	
24.	Has	any governmental unit notified you that yo	ou may be liable or potentially liable	e under or in violation of an environn	nental law?
		No			
		Yes. Fill in the details.			
		me of site dress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)	Environmental law, if you know it	Date of notice
25.	Hav	e you notified any governmental unit of an	y release of hazardous material?		
		No			
		Yes. Fill in the details.			
		me of site dress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)	Environmental law, if you know it	Date of notice
26.	Hav	e you been a party in any judicial or admini	istrative proceeding under any env	ironmental law? Include settlements	and orders.
		No Yes. Fill in the details.			
		se Title se Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case
Pa	rt 11:	Give Details About Your Business or Cor	nnections to Any Business		
27.	Witl	hin 4 years before you filed for bankruptcy,	did you own a business or have a	ny of the following connections to ar	ny business?
		☐ A sole proprietor or self-employed in a	•	•	-
		☐ A member of a limited liability company	y (LLC) or limited liability partnersh	nip (LLP)	
Offic	ial Fo		of Financial Affairs for Individuals Filing	• • •	page

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Best Case Bankruptcy

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Deb	tor 1 Kathryn J. Sloe	(Case number (if known)
	☐ A partner in a partnership			
	☐ An officer, director, or managing e	xecutive of a corporation		
	☐ An owner of at least 5% of the voti	ng or equity securities of a corporation		
	☐ No. None of the above applies. Go to			
Yes. Check all that apply above and fill in the details below for each business.				
	Business Name	Describe the nature of the business	Employer	Identification number
	Address (Number, Street, City, State and ZIP Code)			clude Social Security number or ITIN.
	(Number, Street, City, State and Zir Code)	Name of accountant or bookkeeper	Dates bus	siness existed
	My Zen Garden	reiki clases and services	EIN:	47-1801273
			From-To	December 6, 2014 - May 2015
	☐ Yes. Fill in the details below. Name Address (Number, Street, City, State and ZIP Code) 12: Sign Below The read the answers on this Statement of Files.	Date Issued	II declare uno	der penalty of perjury that the answers
are t with 18 U	rue and correct. I understand that making a bankruptcy case can result in fines up to .S.C. §§ 152, 1341, 1519, and 3571.	a false statement, concealing property, o	r obtaining m	oney or property by fraud in connection
	Kathryn J. Sloe hryn J. Sloe	Signature of Debtor 2		
	nature of Debtor 1	3		
Date	February 17, 2016	Date		
Did y		nent of Financial Affairs for Individuals Fi	ling for Bankı	ruptcy (Official Form 107)?
Did y	you pay or agree to pay someone who is no	ot an attorney to help you fill out bankrup	tcy forms?	
=	•	Attach the Bankruptcy Petition Prepare	r's Notice, Dec	claration, and Signature (Official Form 119).

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

	DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR				
I declare under that they are tru	. , , ,	wers contained i	n the foregoing statement of financial affairs and any attachments thereto and		
Date Febru	ary 17, 2016	Signature	/s/ Kathryn J. Sloe Kathryn J. Sloe		
			Debtor		

Case number (if known)

Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571

Official Form 107

Debtor 1 Kathryn J. Sloe

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Debtor 1	Kathryn J. Sloe			
Debior 1	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DIS	TRICT OF OHIO	
Case number				
(if known)				☐ Check if this is an
				amended filing
Official Fo	orm 108			
Stateme	nt of Intentio	n for Indiv	<i>r</i> iduals Filing Under Chapt	er 7
	dividual filing under cha	-	II out this form if:	
	ve claims secured by yo			
•	sed personal property a		not expired. · you file your bankruptcy petition or by the date :	set for the meeting of creditors
	ever is earlier, unless th		ne time for cause. You must also send copies to t	
	eople are filing togethe	r in a joint case, b	oth are equally responsible for supplying correct	information. Both debtors must
Be as complete	and accurate as possib	le. If more space i	s needed, attach a separate sheet to this form. O	n the top of any additional pages.
	our name and case nur			in the top of any additional pages,
Part 1: List Y	our Creditors Who Have	e Secured Claims		
1. For any credit information b		art 1 of Schedule I	D: Creditors Who Have Claims Secured by Proper	ty (Official Form 106D), fill in the
Identify the ci	reditor and the property t	hat is collateral	What do you intend to do with the property the secures a debt?	
			secures a dept?	as exempt on Schedule C?
				_
_	Bk Of Amer		Surrender the property.	□ No
name:			Retain the property and redeem it.	■ Yes
Description of	f 2007 Audi A4 1060	00 miles	☐ Retain the property and enter into a Reaffirmation Agreement.	– 165
property	Fair Condition		Retain the property and [explain]:	
securing debt	::			
Dort 2: List V	Your Unavaired Persons	I Proporty I occor		
	our Unexpired Persona ed personal property le		in Schedule G: Executory Contracts and Unexpi	red Leases (Official Form 106G), fill
in the information	on below. Do not list rea	al estate leases. U	nexpired leases are leases that are still in effect;	the lease period has not yet ended.
tou may assum	ie an unexpired persona	ii property lease if	the trustee does not assume it. 11 U.S.C. § 365(p)(2).
Describe your	unexpired personal prop	perty leases		Will the lease be assumed?
Lessor's name:				
Description of le	eased			□ No
Property:				☐ Yes
				_
Lessor's name: Description of le	eased			□ No
Property:				☐ Yes
Lessor's name:				□ No
Official Form 108	3	Statement of Ir	ntention for Individuals Filing Under Chapter 7	page 1

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Best Case Bankruptcy

B8 (Form 8) (12/08)	Page 2
Description of leased Property:	☐ Yes
Lessor's name:	□ No
Description of leased Property:	☐ Yes
Lessor's name:	□ No
Description of leased Property:	☐ Yes
Lessor's name:	□ No
Description of leased Property:	☐ Yes
Lessor's name:	□ No
Description of leased Property:	☐ Yes
Part 3: Sign Below	
Under penalty of perjury, I declare that I have indicated my intention property that is subject to an unexpired lease.	about any property of my estate that secures a debt and any personal
X /s/ Kathryn J. Sloe	x
Kathryn J. Sloe	Signature of Debtor 2
Signature of Debtor 1	
Date February 17, 2016	Date

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

page 2

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Fill i	n this information to identify your case:		Check one box only a	s directed in this for	m and in
Debt	tor 1 Kathryn J. Sloe		Form 122A-1Supp:		
Debt					
(Spc	ouse, if filing)		■ 1. There is no pres	umption of abuse	
Unite	ed States Bankruptcy Court for the: Northern District of	Ohio	☐ 2. The calculation t	·	mption of abuse
	e number		applies will be n	nade under <i>Chapter 7</i> icial Form 122A-2).	
			☐ 3. The Means Test qualified military	does not apply now by service but it could a	
-	–		☐ Check if this is a	n amended filing	
	icial Form 122A - 1	4 84 41 1 . 1 .			
Ch	apter 7 Statement of Your Cur	rent Monthly In	ncome		12/15
space addit you o	s complete and accurate as possible. If two married pe is needed, attach a separate sheet to this form. Incional pages, write your name and case number (if knd not have primarily consumer debts or because of umption of Abuse Under § 707(b)(2) (Official Form 12) Calculate Your Current Monthly Income	lude the line number to w own). If you believe that y qualifying military service	rhich the additional info you are exempted from e, complete and file <i>Sta</i>	ormation applies. On a presumption of ab	the top of any use because
1.	What is your marital and filing status? Check one on	ly.			
	■ Not married. Fill out Column A, lines 2-11.				
	$\hfill\square$ Married and your spouse is filing with you. Fill our	t both Columns A and B, lir	nes 2-11.		
	☐ Married and your spouse is NOT filing with you. `	ou and your spouse are:			
	Living in the same household and are not lega	Ily separated. Fill out both	Columns A and B, lines	2-11.	
	☐ Living separately or are legally separated. Fill of penalty of perjury that you and your spouse are legiving apart for reasons that do not include evading	gally separated under nonb	pankruptcy law that appli	es or that you and you	
of in	Il in the average monthly income that you received frase. 11 U.S.C. § 101(10A). For example, if you are filing your monthly income varied during the 6 months, add the come amount more than once. For example, if both spouyou have nothing to report for any line, write \$0 in the sp	on September 15, the 6-mo e income for all 6 months a uses own the same rental p	onth period would be Mar and divide the total by 6.	rch 1 through August 3 Fill in the result. Do no	11. If the amount of include any
			Column A Debtor 1	Column B Debtor 2 or non-filing spouse	
2.	Your gross wages, salary, tips, bonuses, overtime, a all payroll deductions).	and commissions (before	\$1,226.48	\$	
3.	Alimony and maintenance payments. Do not include Column B is filled in.	payments from a spouse if	\$0.00	\$	
4.	All amounts from any source which are regularly pa of you or your dependents, including child support. from an unmarried partner, members of your household and roommates. Include regular contributions from a sp filled in. Do not include payments you listed on line 3.	Include regular contribution, your dependents, parents	ns ,	\$	
5.	Net income from operating a business, profession,				
		Debtor 1			
	Gross receipts (before all deductions)	\$ 0.00			
	Ordinary and necessary operating expenses	-\$ 0.00 Conv boro		¢	
	Net monthly income from a business, profession, or farm	n \$0.00 Copy here	->\$0.00	\$	
6.	Net income from rental and other real property	Debtor 1			
	Gross receipts (before all deductions)	\$ 0.00			
	Ordinary and necessary operating expenses	-\$ 0.00			
	Net monthly income from rental or other real property	\$ 0.00 Copy here	->\$ 0.00	\$	
7.	Interest, dividends, and royalties		\$ 0.00	\$	

Official Form 122A-1 Chapter 7 Statement of Your Current Monthly Income Software Copyright (c) 1996-2015 Best Case, LLC - www.bestcase.com

Best Case Bankruptcy

				Column A Debtor 1		Column B Debtor 2 or non-filing s		
8.	Unemployment compensation			\$	0.00	\$		
	Do not enter the amount if you contend that the amour under the Social Security Act. Instead, list it here:	nt received was a bene	efit					
	For you \$	0	.00					
	For your spouse \$.						
9.	Pension or retirement income. Do not include any arbenefit under the Social Security Act.	mount received that w	as a	\$	0.00	\$		
10.	Income from all other sources not listed above. Sp Do not include any benefits received under the Social received as a victim of a war crime, a crime against hu domestic terrorism. If necessary, list other sources on total below.	Security Act or payme imanity, or internation	nts al or					
	·			\$	0.00	\$		
				\$	0.00	\$		
	Total amounts from separate pages, if any.		+	. \$	0.00	\$		
11.	Calculate your total current monthly income. Add li each column. Then add the total for Column A to the to		\$	1,226.48	+ \$		= \$	1,226.48
					J L		Total c	urrent monthly
Part	Part 2: Determine Whether the Means Test Applies to You							
12.	Calculate your current monthly income for the year	Follow these steps:						
	12a. Copy your total current monthly income from line	11		Сору	line 11 h	ere=>	\$	1,226.48
	Multiply by 12 (the number of months in a year)						x 1	
	12b. The result is your annual income for this part of the	ne form				12b.	\$	14,717.76
13.	Calculate the median family income that applies to	you. Follow these ste	eps:					
	Fill in the state in which you live.	ОН						
	Fill in the number of people in your household.	1						
	Fill in the median family income for your state and size To find a list of applicable median income amounts, go for this form. This list may also be available at the ban	online using the link	specifie	d in the separ	ate instruc	13. tions	\$4	14,796.00
14.	How do the lines compare?							
	14a. Line 12b is less than or equal to line 13. C Go to Part 3.	On the top of page 1, c	heck bo	ox 1, There is	no presun	nption of abus	e.	
	14b. Line 12b is more than line 13. On the top Go to Part 3 and fill out Form 122A-2.	of page 1, check box 2	2, The p	oresumption of	fabuse is	determined by	/ Form 1	22A-2.
Part	3: Sign Below							
	By signing here, I declare under penalty of perjury	that the information of	on this s	statement and	in any atta	achments is tr	ue and o	correct.
	χ /s/ Kathryn J. Sloe							
	Kathryn J. Sloe							
	Signature of Debtor 1							
	Date February 17, 2016 MM / DD / YYYY							
	If you checked line 14a, do NOT fill out or file For	m 122A-2.						
	If you checked line 14b, fill out Form 122A-2 and file it with this form.							

Official Form 122A-1

Current Monthly Income Details for the Debtor

Debtor Income Details:

Income for the Period 08/01/2015 to 01/31/2016.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: **Hudson Hospitality2151.06**

Income by Month:

6 Months Ago:	08/2015	\$0.00
5 Months Ago:	09/2015	\$0.00
4 Months Ago:	10/2015	\$2,151.06
3 Months Ago:	11/2015	\$0.00
2 Months Ago:	12/2015	\$0.00
Last Month:	01/2016	\$0.00
	Average per month:	\$358.51

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: **Panini** Year-to-Date Income:

Last Year:

Starting Year-to-Date Income: **\$0.00** from check dated **7/31/2015**. Ending Year-to-Date Income: **\$1,081.35** from check dated **12/31/2015**.

This Year:

Current Year-to-Date Income: \$534.60 from check dated ____1/31/2016 _.

 $Income \ for \ six-month \ period \ (Current+(Ending-Starting)): \ \underline{\$1,615.95} \ .$

Average Monthly Income: **\$269.33**.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: Water Golf Ltd

Income by Month:

income by Monui.		
6 Months Ago:	08/2015	\$1,795.92
5 Months Ago:	09/2015	\$1,795.92
4 Months Ago:	10/2015	\$0.00
3 Months Ago:	11/2015	\$0.00
2 Months Ago:	12/2015	\$0.00
Last Month:	01/2016	\$0.00
	Average per month:	\$598.64

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations:

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee \$1.717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html.

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

United States Bankruptcy Court Northern District of Ohio

In r	e Kathryn J. Sloe		Case N	· O.				
		Debtor(s)	Chapte	r 7				
	DISCLOSURE OF COMPEN	NSATION OF ATTOR	NEY FOR	DEBTOR(S)				
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016 compensation paid to me within one year before the filin be rendered on behalf of the debtor(s) in contemplation of	aid to me, for servic						
	For legal services, I have agreed to accept		\$	1,400.00				
	Prior to the filing of this statement I have received			1,400.00				
	Balance Due		\$	0.00				
2.	\$335.00 of the filing fee has been paid.							
3.	The source of the compensation paid to me was:							
	■ Debtor □ Other (specify):							
4.	The source of compensation to be paid to me is:							
	■ Debtor □ Other (specify):							
 I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. copy of the agreement, together with a list of the names of the people sharing in the compensation is attached. 								
							6.	In return for the above-disclosed fee, I have agreed to re
	 a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy; b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required; c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof; d. [Other provisions as needed] 							
7.	. By agreement with the debtor(s), the above-disclosed fee does not include the following service:							
		CERTIFICATION						
I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.								
	February 17, 2016	/s/ Heather L. Mos	eman					
_	Date Heather L. Moseman 0076457 Signature of Attorney Moseman Law Office, LLC 8518 Mentor Avenue, Suite F Mentor, OH 44060 440-255-0832 Fax: 440-255-0932							
	heather@mosemanlaw.com Name of law firm							

United States Bankruptcy Court Northern District of Ohio

In re	Kathryn J. Sloe		Case No.	
		Debtor(s)	Chapter	7
	VERI	FICATION OF CREDITOR	MATRIX	
The abo	ove-named Debtor hereby verifies th	nat the attached list of creditors is true and c	orrect to the best	of his/her knowledge.
Date:	February 17, 2016	/s/ Kathryn J. Sloe Kathryn J. Sloe		
		Signature of Debtor		

Animal Hospital Inc. 2735 SOM Center Road Willoughby, OH 44094

Barclays Bank Delaware 125 S West St Wilmington, DE 19801

Bby/cbna 50 Northwest Point Road Elk Grove Village, IL 60007

Bk Of Amer Po Box 45144 Jacksonville, FL 32231

Bk Of Amer Po Box 982238 El Paso, TX 79998

Citizens Bank 1000 Lafayette Blvd Bridgeport, CT 06604

Comenity Bank/limited Po Box 182789 Columbus, OH 43218

Drs Alperin & Fried 5825 Landerbrook Drive #125 Cleveland, OH 44124

ERC 8014 Bayberry Road Jacksonville, FL 32256

Lake Health P.O. Box 715019 Columbus, OH 43271-5019

Minuteclinic Diagnostic of Ohio PO Box 329 Woonsocket, RI 02895-0781 Navient Po Box 9500 Wilkes Barre, PA 18773

Navient Po Box 9655 Wilkes Barre, PA 18773

PayPal Credit SVCS/SYNCB PO Box 960080 Orlando, FL 32896-0080

Syncb/lowes Po Box 956005 Orlando, FL 32896

Syncb/mega Group Usa I C/o Po Box 965036 Orlando, FL 32896

Transworld System 507 Prudential Road Horsham, PA 19044